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| B1 (Official  | Form 1)(1/  | 08)                           |                                |                                   |  | oamon  |   | 490 ± 0  | . 00  |                          |              |                              |
|---|---|-------------------------------|--------------------------------|-----------------------------------|--|--|---|--|---|--------------------------|--------------|------------------------------|
|   |   |                               | United<br>No                   |                                   |  | ruptcy<br>of Illino  |   | t  |   |                          | Vo           | luntary Petition             |
|   | Name of Debtor (if individual, enter Last, First, Middle):  Topor, Steven W |                               |                                |                                   |  |  | Name of Joint Debtor (Spouse) (Last, First, Middle):  Topor, Kristine L |  |   |                          |              |                              |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):  |   |                               |                                |                                   |  |  | used by the , maiden, and   |  |   | 8 years                  |              |                              |
| Last four di<br>(if more than   | igits of Soc.   | Sec. or Indi                  | vidual-Taxp                    | ayer I.D. (                       | (ITIN) No./  | Complete E   | (if m   | four digits of the four than one, s                                  | state all)  | r Individual-            | Taxpayer 1   | I.D. (ITIN) No./Complete EIN |
| Street Addr   | ess of Debto  |                               | Street, City,                  | and State)                        | _  | ZIP Code   | Stree<br>1  | et Address of  | f Joint Debtor  |                          | reet, City,  | and State):  ZIP Code        |
|   | Residence or  | of the Prin                   | cipal Place o                  | of Busines                        |  | 60403  |   | -  | ence or of the  | Principal Pl             | ace of Bus   | 60403<br>siness:             |
| Will Mailing Ad   | dress of Deb  | otor (if diffe                | rent from str                  | eet addres                        | ss):   |  |   | ill<br>ing Address   | of Joint Deb  | tor (if differe          | ent from str | reet address):               |
|   |   | `                             |                                |                                   | ,  |  |   | C  |   |                          |              | ,                            |
|   |   |                               |                                |                                   |  | ZIP Code   | :   |  |   |                          |              | ZIP Code                     |
|   | Principal A   |                               |                                | r                                 |  |  |   |  |   |                          |              |                              |
| 31  |   |                               | eal Estate as<br>101 (51B)     |                                   | Chapi  | the 1 ter 7 ter 9 ter 11 ter 12  | Petition is F   | thapter 15<br>f a Foreign<br>thapter 15<br>f a Foreign<br>e of Debts | Petition for Recognition  Main Proceeding  Petition for Recognition  Nonmain Proceeding |                          |              |                              |
| Check un  | is box and stat   | e type or end                 | ny below.y                     | und                               | (Check box<br>otor is a tax-<br>er Title 26                  | empt Entity<br>x, if applicable<br>exempt orgof the Unite<br>al Revenue            | e)<br>ganization<br>ed States   | States "incurred by an individual primarily for                      |   |                          |              |                              |
| ■ Full Fili   | ing Fee attac   | _                             | ee (Check o                    | ne box)                           |  |  | _   | ck one box:  Debtor is   |   | Chapter 11 ness debtor a |              | n 11 U.S.C. § 101(51D).      |
| <ul> <li>Full Filing Fee attached</li> <li>☐ Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.</li> <li>☐ Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.</li> </ul> |   |                               |                                | Chec                              | ck if: Debtor's to insider ck all applica A plan is Acceptan | aggregate not<br>s or affiliates<br>able boxes:<br>being filed w<br>ces of the pla | ncontingent land) are less that with this petition were solic           | liquidated<br>n \$2,190,0<br>ion.<br>ited prepet                     | ded in 11 U.S.C. § 101(51D).  debts (excluding debts owed 100.  debts owed 100.         |                          |              |                              |
| ☐ Debtor of Debtor of   | Administrates that estimates that estimates that ill be no fund             | t funds will<br>it, after any | l be available<br>exempt proj  | erty is ex                        | cluded and   | administrat  |   | ses paid,  |   | THIS                     | S SPACE IS   | FOR COURT USE ONLY           |
| Estimated N  1- 49  | Number of C<br>50-<br>99  | reditors  100- 199            | 200-<br>999                    | 1,000-<br>5,000                   | 5,001-<br>10,000   | 10,001-<br>25,000  | 25,001-<br>50,000   | 50,001-<br>100,000   | OVER 100,000  |                          |              |                              |
| Estimated A  \$0 to \$50,000  | Assets \$50,001 to \$100,000  | \$100,001 to<br>\$500,000     | \$500,001<br>to \$1<br>million | \$1,000,001<br>to \$10<br>million | \$10,000,001<br>to \$50<br>million                           | \$50,000,001<br>to \$100<br>million  | \$100,000,0<br>to \$500<br>million                                      | 01 \$500,000,001<br>to \$1 billion                                   |   |                          |              |                              |
| Estimated I.  \$0 to \$50,000   | Liabilities   | \$100,001 to<br>\$500,000     | \$500,001<br>to \$1<br>million | \$1,000,001<br>to \$10<br>million | \$10,000,001<br>to \$50<br>million                           | \$50,000,001<br>to \$100<br>million  | \$100,000,0<br>to \$500<br>million                                      | 5500,000,000<br>to \$1 billion                                       |   |                          |              |                              |

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Page 2 Name of Debtor(s): Voluntary Petition Topor, Steven W (This page must be completed and filed in every case) Topor, Kristine L All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Location Date Filed: Where Filed: - None -Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Stephen J. West, Atty. March 13, 2008 Signature of Attorney for Debtor(s) (Date) Stephen J. West, Atty. 02989794 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ■ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

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## **Voluntary Petition**

(This page must be completed and filed in every case)

#### **Signatures**

Signature(s) of Debtor(s) (Individual/Joint) I declare under penalty of perjury that the information provided in this petition is true and correct.

If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

#### X /s/ Steven W Topor

Signature of Debtor Steven W Topor

#### X /s/ Kristine L Topor

Signature of Joint Debtor Kristine L Topor

Telephone Number (If not represented by attorney)

#### March 13, 2008

Date

#### Signature of Attorney\*

#### X /s/ Stephen J. West, Atty.

Signature of Attorney for Debtor(s)

#### Stephen J. West, Atty. 02989794

Printed Name of Attorney for Debtor(s)

#### Stephen J. West

Firm Name

628 Columbus Dr.

Rm. 102

Ottawa, IL 61350

Address

#### 815-434-7250 Fax: 815-434-0951

Telephone Number

### March 13, 2008

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

Page 3

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s):

Topor, Steven W Topor, Kristine L

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

#### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

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Official Form 1, Exhibit D (10/06)

# **United States Bankruptcy Court Northern District of Illinois**

| T     | Steven W Topor   |           | C N-     |   |
|-------|------------------|-----------|----------|---|
| In re | Kristine L Topor |           | Case No. |   |
|       |                  | Debtor(s) | Chapter  | 7 |

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.] \_\_\_\_

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

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## Official Form 1, Exh. D (10/06) - Cont.

| ☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable            |
|---|
| statement.] [Must be accompanied by a motion for determination by the court.]                               |
| ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or                  |
| mental deficiency so as to be incapable of realizing and making rational decisions with respect to          |
| financial responsibilities.);   |
| ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being               |
| unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or |
| through the Internet.);   |
| ☐ Active military duty in a military combat zone.   |
|   |

 $\square$  5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

| Signature of Debtor: _ |                | /s/ Steven W Topor |  |
|------------------------|----------------|--------------------|--|
|                        |                | Steven W Topor     |  |
| Date:                  | March 13, 2008 |                    |  |

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Official Form 1, Exhibit D (10/06)

# **United States Bankruptcy Court Northern District of Illinois**

| T     | Steven W Topor   |           | C N-     |   |
|-------|------------------|-----------|----------|---|
| In re | Kristine L Topor |           | Case No. |   |
|       |                  | Debtor(s) | Chapter  | 7 |

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.] \_\_\_\_

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

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### Official Form 1, Exh. D (10/06) - Cont.

| ☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable         |
|--|
| statement.] [Must be accompanied by a motion for determination by the court.]                            |
| ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or               |
| mental deficiency so as to be incapable of realizing and making rational decisions with respect to       |
| financial responsibilities.);  |
| ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being            |
| unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, |
| through the Internet.);  |
| ☐ Active military duty in a military combat zone.  |
| □ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling     |

I certify under penalty of perjury that the information provided above is true and correct.

| Signature of Debtor: | /s/ Kristine L Topor |  |
|----------------------|----------------------|--|
|                      | Kristine L Topor     |  |

requirement of 11 U.S.C. § 109(h) does not apply in this district.

Date: March 13, 2008

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B7 (Official Form 7) (12/07)

### United States Bankruptcy Court Northern District of Illinois

| In re | Steven W Topor<br>Kristine L Topor |           |         |   |  |
|-------|------------------------------------|-----------|---------|---|--|
|       | •                                  | Debtor(s) | Chapter | 7 |  |

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| AMOUNT      | SOURCE   |
|-------------|----------|
| \$47,400.00 | Him 2006 |
| \$43,000.00 | 2007     |
| \$14,300.00 | Her 2006 |
| \$10,000.00 | 2007     |

#### 2. Income other than from employment or operation of business

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**AMOUNT SOURCE** 

#### 3. Payments to creditors

None 

Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts. List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR P.H.H. Mortgage Services | DATES OF PAYMENTS Monthly payment | AMOUNT PAID<br><b>\$707.00</b> | AMOUNT STILL<br>OWING<br>\$70,200.00 |
|---|-----------------------------------|--------------------------------|--------------------------------------|
| HSBC Auto Finance                                     | Monthly payment                   | \$568.00                       | \$24,800.00                          |
| GE Money Bank   | Monthly payment                   | \$189.00                       | \$10,800.00                          |
| Heights Finance                                       | Monthly payment                   | \$150.00                       | \$3,470.00                           |

None b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**AMOUNT** DATES OF PAID OR PAYMENTS/ VALUE OF AMOUNT STILL NAME AND ADDRESS OF CREDITOR **TRANSFERS TRANSFERS** OWING

None c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND AMOUNT STILL RELATIONSHIP TO DEBTOR DATE OF PAYMENT AMOUNT PAID **OWING** 

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2

None

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#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None 

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER

NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION

STATUS OR DISPOSITION 3

Debtor, Steven Topor, has a pending workmans comp case for injuries in 2007. His attorney is Jack Cannon (312)977-0100.

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF

**PROPERTY** 

#### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF REPOSSESSION.

NAME AND ADDRESS OF CREDITOR OR SELLER

FORECLOSURE SALE. TRANSFER OR RETURN

DESCRIPTION AND VALUE OF

**PROPERTY** 

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE

ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND LOCATION

NAME AND ADDRESS OF COURT OF CUSTODIAN CASE TITLE & NUMBER DATE OF **ORDER** 

DESCRIPTION AND VALUE OF

**PROPERTY** 

7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

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8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

4

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

5

#### 14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

DESCRIPTION AND VALUE OF

NAME AND ADDRESS OF OWNER

**PROPERTY** 

LOCATION OF PROPERTY

#### 15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

**ENVIRONMENTAL** 

NOTICE

LAW

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF

DATE OF

**ENVIRONMENTAL** 

SITE NAME AND ADDRESS

GOVERNMENTAL UNIT

NOTICE

LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF **GOVERNMENTAL UNIT** 

DOCKET NUMBER

STATUS OR DISPOSITION

#### 18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

(ITIN)/ COMPLETE EIN ADDRESS

**BEGINNING AND** NATURE OF BUSINESS

**ENDING DATES** 

None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

**ADDRESS NAME** 

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

#### NAME AND ADDRESS

#### DATES SERVICES RENDERED

None b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME **ADDRESS** 

DATES SERVICES RENDERED

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records None of the debtor. If any of the books of account and records are not available, explain.

**ADDRESS** NAME

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

20. Inventories

None a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory,

and the dollar amount and basis of each inventory.

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

DATE OF INVENTORY

INVENTORY SUPERVISOR

(Specify cost, market of other basis)

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

DATE OF INVENTORY

21. Current Partners, Officers, Directors and Shareholders

None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS NATURE OF INTEREST PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NATURE AND PERCENTAGE
NAME AND ADDRESS TITLE OF STOCK OWNERSHIP

22 . Former partners, officers, directors and shareholders

None a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS
OF RECIPIENT,
DATE AND PURPOSE
OR DESCRIPTION AND
VALUE OF PROPERTY

OR DESCRIPTION AND
VALUE OF PROPERTY

24. Tax Consolidation Group.

None If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION TAXPAYER IDENTIFICATION NUMBER (EIN)

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25. Pension Funds.

None If the

If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

8

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date | March 13, 2008 | Signature | /s/ Steven W Topor   |
|------|----------------|-----------|----------------------|
|      |                |           | Steven W Topor       |
|      |                |           | Debtor               |
| Date | March 13, 2008 | Signature | /s/ Kristine L Topor |
|      |                |           | Kristine L Topor     |
|      |                |           | Joint Debtor         |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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B6 Summary (Official Form 6 - Summary) (12/07)

# **United States Bankruptcy Court Northern District of Illinois**

| In re | Steven W Topor,  |         | Case No. |   |
|-------|------------------|---------|----------|---|
|       | Kristine L Topor |         |          |   |
| -     |                  | Debtors | Chapter  | 7 |
|       |                  |         |          |   |

## **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE  | ATTACHED<br>(YES/NO) | NO. OF<br>SHEETS | ASSETS            | LIABILITIES | OTHER    |
|---|----------------------|------------------|-------------------|-------------|----------|
| A - Real Property   | Yes                  | 1                | 80,000.00         |             |          |
| B - Personal Property   | Yes                  | 3                | 35,455.00         |             |          |
| C - Property Claimed as Exempt  | Yes                  | 1                |                   |             |          |
| D - Creditors Holding Secured Claims  | Yes                  | 1                |                   | 105,800.00  |          |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes                  | 1                |                   | 0.00        |          |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                           | Yes                  | 11               |                   | 36,485.00   |          |
| G - Executory Contracts and<br>Unexpired Leases                                 | Yes                  | 1                |                   |             |          |
| H - Codebtors   | Yes                  | 1                |                   |             |          |
| I - Current Income of Individual<br>Debtor(s)                                   | Yes                  | 1                |                   |             | 3,812.00 |
| J - Current Expenditures of Individual Debtor(s)                                | Yes                  | 1                |                   |             | 3,803.00 |
| Total Number of Sheets of ALL Schedu  | ıles                 | 22               |                   |             |          |
|   | T                    | otal Assets      | 115,455.00        |             |          |
|   |                      |                  | Total Liabilities | 142,285.00  |          |

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Form 6 - Statistical Summary (12/07)

# **United States Bankruptcy Court Northern District of Illinois**

| In re | Steven W Topor,  |         | Case No. |   |  |
|-------|------------------|---------|----------|---|--|
|       | Kristine L Topor |         |          |   |  |
| _     |                  | Debtors | Chapter  | 7 |  |

## STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C.  $\S$  159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability   | Amount |
|---|--------|
| Domestic Support Obligations (from Schedule E)  | 0.00   |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)  | 0.00   |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | 0.00   |
| Student Loan Obligations (from Schedule F)  | 0.00   |
| Domestic Support, Separation Agreement, and Divorce Decree<br>Obligations Not Reported on Schedule E                | 0.00   |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)                           | 0.00   |
| TOTAL   | 0.00   |

#### State the following:

| Average Income (from Schedule I, Line 16)  | 3,812.00 |
|--|----------|
| Average Expenses (from Schedule J, Line 18)  | 3,803.00 |
| Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20) | 5,151.00 |

#### State the following:

| Total from Schedule D, "UNSECURED PORTION, IF ANY" column                  |      | 800.00    |
|--|------|-----------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column             | 0.00 |           |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column |      | 0.00      |
| 4. Total from Schedule F   |      | 36,485.00 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)               |      | 37,285.00 |

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B6A (Official Form 6A) (12/07)

| In re | Steven W Topor,  | Case No. |
|-------|------------------|----------|
|       | Kristine L Topor |          |

Debtors

#### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Current Value of Husband, Debtor's Interest in Wife, Joint, or Nature of Debtor's Amount of Description and Location of Property Property, without Interest in Property Secured Claim Deducting any Secured Claim or Exemption Community Location: 1805 N. Broadway St., Crest Hill IL Petitioner, Steven Topor, 80,000.00 70,200.00 Н owns a fee simple interest in his home.

Sub-Total > **80,000.00** (Total of this page)

Total > **80,000.00** 

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B6B (Official Form 6B) (12/07)

| In re | Steven W Topor,  | Case No. |
|-------|------------------|----------|
|       | Kristine L Topor |          |

Debtors

#### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

|     | Type of Property  | N O Description and Location of Property E              | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|---|---|---|---|
| 1.  | Cash on hand  | Cash on hand  | J   | 10.00   |
| 2.  | Checking, savings or other financial  | Checking account - TCF Bank                             | J   | 100.00  |
|     | accounts, certificates of deposit, or<br>shares in banks, savings and loan,<br>thrift, building and loan, and<br>homestead associations, or credit<br>unions, brokerage houses, or<br>cooperatives. | Savings account - TCF Bank                              | J   | 5.00  |
| 3.  | Security deposits with public utilities, telephone companies, landlords, and others.  | x   |   |   |
| 4.  | Household goods and furnishings, including audio, video, and computer equipment.  | Miscellaneous household goods, furniture & furnishings. | J   | 800.00  |
| 5.  | Books, pictures and other art<br>objects, antiques, stamp, coin,<br>record, tape, compact disc, and<br>other collections or collectibles.   | x   |   |   |
| 6.  | Wearing apparel.  | Wearing apparel   | J   | 40.00   |
| 7.  | Furs and jewelry.   | x   |   |   |
| 8.  | Firearms and sports, photographic, and other hobby equipment.   | x   |   |   |
| 9.  | Interests in insurance policies.<br>Name insurance company of each<br>policy and itemize surrender or<br>refund value of each.  | x   |   |   |
| 10. | Annuities. Itemize and name each issuer.  | x   |   |   |

Sub-Total > 955.00 (Total of this page)

**<sup>2</sup>** continuation sheets attached to the Schedule of Personal Property

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 $B6B\ (Official\ Form\ 6B)\ (12/07)$  - Cont.

| In re | Steven W Topor,  |  |  |
|-------|------------------|--|--|
|       | Kristine L Topor |  |  |

#### Debtors

## **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

|     | Type of Property  | N<br>O<br>N<br>E | Description and Location of Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property<br>without Deducting any<br>Secured Claim or Exemption |
|-----|---|------------------|--------------------------------------|---|--|
|     | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X                |                                      |   |  |
|     | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.   | X                |                                      |   |  |
|     | Stock and interests in incorporated and unincorporated businesses. Itemize.   | X                |                                      |   |  |
|     | Interests in partnerships or joint ventures. Itemize.   | X                |                                      |   |  |
|     | Government and corporate bonds and other negotiable and nonnegotiable instruments.  | X                |                                      |   |  |
| 16. | Accounts receivable.  | X                |                                      |   |  |
|     | Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.  | X                |                                      |   |  |
|     | Other liquidated debts owed to debtor including tax refunds. Give particulars.  | X                |                                      |   |  |
|     | Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.  | X                |                                      |   |  |
|     | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.  | X                |                                      |   |  |
|     | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.  | X                |                                      |   |  |
|     |   |                  |                                      | Sub-Tota                                    | 0.00   |
|     |   |                  | (7)                                  | Sub-Tota<br>(Fotal of this page             | al > <b>0.00</b>   |

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

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 $B6B\ (Official\ Form\ 6B)\ (12/07)$  - Cont.

| In re | Steven W Topor,  |
|-------|------------------|
|       | Kristine L Topor |

| Case No. |
|----------|
|----------|

#### Debtors

## **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

|     | Type of Property  | N<br>O<br>N<br>E | cription and Location of Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|---|------------------|-----------------------------------|---|---|
| 22. | Patents, copyrights, and other intellectual property. Give particulars.   | х                |                                   |   |   |
| 23. | Licenses, franchises, and other general intangibles. Give particulars.  | X                |                                   |   |   |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X                |                                   |   |   |
| 25. | Automobiles, trucks, trailers, and  | 2005 Chevrolet   |                                   | J   | 22,000.00   |
|     | other vehicles and accessories.   | 2006 Yamaha me   | otorcycle                         | н   | 10,000.00   |
|     |   | 2000 Pontiac     |                                   | J   | 2,500.00  |
| 26. | Boats, motors, and accessories.   | x                |                                   |   |   |
| 27. | Aircraft and accessories.   | x                |                                   |   |   |
| 28. | Office equipment, furnishings, and supplies.  | X                |                                   |   |   |
| 29. | Machinery, fixtures, equipment, and supplies used in business.  | X                |                                   |   |   |
| 30. | Inventory.  | x                |                                   |   |   |
| 31. | Animals.  | x                |                                   |   |   |
| 32. | Crops - growing or harvested. Give particulars.   | x                |                                   |   |   |
| 33. | Farming equipment and implements.   | X                |                                   |   |   |
| 34. | Farm supplies, chemicals, and feed.   | x                |                                   |   |   |
| 35. | Other personal property of any kind not already listed. Itemize.  | x                |                                   |   |   |

Sheet <u>2</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

| Sub-Total > | **34,500.00** | (Total of this page) | Total > | **35,455.00** |

(Report also on Summary of Schedules)

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B6C (Official Form 6C) (12/07)

| In re | Steven W Topor,  | Case No. |
|-------|------------------|----------|
|       | Kristine L Topor |          |

Debtors

## SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

| Debtor claims the exemptions to which debtor is entitled under: | ☐ Check if debtor claims a homestead exemption that exceeds |
|---|---|
| (Check one box)   | \$136,875.  |
| □ 11 U.S.C. §522(b)(2)  |   |
| ■ 11 U.S.C. §522(b)(3)  |   |

| Description of Property  | Specify Law Providing<br>Each Exemption | Value of<br>Claimed<br>Exemption | Current Value of<br>Property Without<br>Deducting Exemption |
|--|---|----------------------------------|---|
| Other Exemptions The necessary wearing apparel, bible, school books and family pictures of the debtors, Steven W & Kristine L Topor and the debtor's dependants;         | 735 ILCS 5/12-1001(a)                   | 80.00                            | 0.00  |
| Personal property,household goods,furnishings,funds held by employer,funds on deposit, tax returns, other property listed on Schedule B not otherwise claimed as exempt. | 735 ILCS 5/12-1001(b)                   | 8,000.00                         | 0.00  |
| The debtor's interest not to exceed \$2,400 in value in any one motor vehicle.   | 735 ILCS 5/12-1001(c)                   | 4,800.00                         | 0.00  |
| REAL PROPERTY: Exemption for Debtor's residence possessed and occupied by him.   | 735 ILCS 5/12-901                       | 15,000.00                        | 0.00  |

Total: **27,880.00 0.00** 

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B6D (Official Form 6D) (12/07)

| In re | Steven W Topor,  |
|-------|------------------|
|       | Kristine L Topor |

| Case No. |  |  |
|----------|--|--|
|          |  |  |

Debtors

### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | W<br>H | sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED,  NATURE OF LIEN, AND  DESCRIPTION AND VALUE  OF PROPERTY  SUBJECT TO LIEN | COXT _ ZGEZ | UNLLQULDA             | SPUTE | AMOUNT OF<br>CLAIM<br>WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF<br>ANY |
|--|-----------------|--------|--|-------------|-----------------------|-------|--|---------------------------------|
| Account No.  G.E. Money Bank   |                 |        | Security is a 2006 Yamaha motorcycle obtained in 2007 as purchase money security interest.   | Т           | D<br>A<br>T<br>E<br>D |       |  |                                 |
|  |                 | J      |  |             | X                     |       |  |                                 |
|  | ┸               | _      | Value \$ 10,000.00   | $\perp$     |                       |       | 10,800.00  | 800.00                          |
| Account No. 500000200  HSBC Auto Finance 6602 Convoy Court San Diego, CA 92111                       |                 | J      | Security is a 2005 Chevrolet obtained in 2006 as purchase money security interest.   |             | x                     |       |  |                                 |
|  |                 |        | Value \$ Unknown   |             |                       |       | 24,800.00  | Unknown                         |
| Account No. 0015207830  P.H.H. Mortgage Services 4001 Leadenhall Rd. Mount Laurel, NJ 08054          |                 | J      | Security is a mortgage on petitioners home obtained in 2001.   |             | x                     |       |  |                                 |
|  | ┸               |        | Value \$ <b>80,000.00</b>  | $\perp$     |                       |       | 70,200.00  | 0.00                            |
| Account No.  |                 |        | Value \$   |             |                       |       |  |                                 |
| continuation sheets attached   |                 | •      | (Total of  | Subt        |                       |       | 105,800.00   | 800.00                          |
|  |                 |        | (Report on Summary of S  |             | ota<br>ule            |       | 105,800.00   | 800.00                          |

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B6E (Official Form 6E) (12/07)

| •     |                  |         |  |
|-------|------------------|---------|--|
| In re | Steven W Topor,  | Case No |  |
|       | Kristine L Topor |         |  |
| _     |                  | Debtors |  |

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

| Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data. |
|--|
| ■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.  |
| TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)  |
| ☐ Domestic support obligations   |
| Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).  |
| ☐ Extensions of credit in an involuntary case  |
| Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).  |
| ☐ Wages, salaries, and commissions   |
| Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).                                     |
| ☐ Contributions to employee benefit plans  |
| Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of busines whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).   |
| ☐ Certain farmers and fishermen  |
| Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).   |
| ☐ Deposits by individuals  |
| Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).   |
| ☐ Taxes and certain other debts owed to governmental units   |
| Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).  |
| ☐ Commitments to maintain the capital of an insured depository institution   |
| Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).   |
| ☐ Claims for death or personal injury while debtor was intoxicated   |
| Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).   |
|  |

<sup>\*</sup> Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6F (Official Form 6F) (12/07)

| In re | Steven W Topor,  |         | Case No. |  |
|-------|------------------|---------|----------|--|
|       | Kristine L Topor |         |          |  |
| -     |                  | Debtors | ,        |  |

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME,   | Н        | usband, Wife, Joint, or Community | C U D<br>O N I                                 |             |            |        |                 |
|--|----------|-----------------------------------|--|-------------|------------|--------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)   | CODEBTOR | C<br>A<br>M                       |  | NT I NG EN  | UNLIQUIDAT | SPUTED | AMOUNT OF CLAIM |
| Account No.  |          |                                   | Claim was incurred for collection account.     | T           | TED        |        |                 |
| Adventist Hinsdale Hospital<br>PO Box 9247<br>Oak Brook, IL 60522                  |          | J                                 |  |             | x          |        |                 |
| Account No.  |          |                                   | Claim was incurred for collection account.     |             |            |        | 227.00          |
| Adventist Hinsdale Hospital<br>PO Box 9247<br>Oak Brook, IL 60522                  |          | J                                 |  |             | x          |        |                 |
| Account No.  |          |                                   | Claim was incurred for collection account.     |             |            | _      | 227.00          |
| Ameritech Consumer<br>P O Box 6170<br>Carol Stream, IL 60197                       |          | J                                 |  |             | x          |        |                 |
| A  |          |                                   | Olaim man in annual for a libration and annual |             | _          |        | 59.00           |
| Account No.  Anesthesia Associates 350 S. Northwest Hwy. Park Ridge, IL 60068-4216 |          | J                                 | Claim was incurred for collection account.     |             | x          |        | 400.00          |
|  |          |                                   |  | <u>a</u> :  | L          | L      | 180.00          |
| <b>10</b> continuation sheets attached   |          |                                   | (Total o                                       | Sub<br>this |            |        | 693.00          |

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| In re | Steven W Topor,  | Case No. |
|-------|------------------|----------|
|       | Kristine L Topor |          |

| CREDITOR'S NAME,   | Ç        | Ηι          | usband, Wife, Joint, or Community          | C          | Ü      | P   | 5   |                 |
|--|----------|-------------|--|------------|--------|-----|-----|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | ODE BTOR | C<br>H<br>H | IS SUBJECT TO SETOFF, SO STATE.            | CONTINGENT | Q<br>U |     | - 1 | AMOUNT OF CLAIM |
| Account No.  |          |             | Claim was incurred for collection account. | '          | Ė      |     |     |                 |
| Arrow Financial Services<br>2450 W. Peterson<br>Chicago, IL 60659                |          | J           |  |            | X      | t   |     | 945.00          |
| Account No. 8523428401   | T        |             | Claim was incurred for collection account. | T          | T      | T   | †   |                 |
| Aspire Payment Processing PO Box 23007 Columbus, GA 31902-3007                   |          | J           |  |            | x      |     |     | 640.00          |
| Account No.  | T        |             | Claim was incurred for collection account. |            | T      | T   | †   |                 |
| AT&T Telephone<br>% Plaza Associates<br>PO Box 18008<br>Hauppauge, NY 11788-8808 |          | J           |  |            | x      |     |     | 138.00          |
| Account No. <b>5291-0717-6453-8318</b>   | 1        |             | Claim was incurred for collection account. |            | T      | T   | †   |                 |
| Capital One Bank<br>PO Box 790216<br>Saint Louis, MO 63179                       |          | J           |  |            | x      |     |     | 1,514.00        |
| Account No. 111001110029582436   |          | T           | Claim was incurred for collection account. |            | Г      | T   | †   |                 |
| Chase<br>% Encore Receivable Mgmt. Inc.<br>PO Box 3330<br>Olathe, KS 66063-3330  |          | J           |  |            | х      |     |     | 1,057.00        |
| Sheet no1 of _10_ sheets attached to Schedule of                                 |          |             | 2  | Sub        | tota   | ıl  | T   | 4,294.00        |
| Creditors Holding Unsecured Nonpriority Claims                                   |          |             | (Total of t                                | his        | pas    | ze) | ) [ | 4,234.00        |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | Steven W Topor,  | Case No. |
|-------|------------------|----------|
|       | Kristine L Topor |          |

| CDEDITORIS NAME   | С               | Hu          | sband, Wife, Joint, or Community  | С         | U           | D        |                 |
|---|-----------------|-------------|---|-----------|-------------|----------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)             | C O D E B T O R | C<br>J<br>M | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. | CONFINGEN | SL-QU-DAT   | DISPUTED | AMOUNT OF CLAIM |
| Account No. 1727203983091323  |                 |             | Claim was incurred for collection account.  | T         | T<br>E<br>D |          |                 |
| Chase/Circuit City<br>PO Box 52095<br>Phoenix, AZ 85072   |                 | J           |   |           | x           |          | 500.00          |
| Account No.   |                 |             | Claim was incurred for collection account.  |           |             |          | 508.00          |
| Circuit City  |                 | J           |   |           | x           |          |                 |
|   |                 |             |   |           |             |          | 768.00          |
| Account No.   | -               |             | Claim was incurred for collection account.  |           |             |          |                 |
| Collection Company of America<br>PO Box 608<br>Tinley Park, IL 60477  |                 | J           |   |           | x           |          | 50.00           |
| Account No. <b>8798201440241605</b>   |                 |             | Claim was incurred for services.  |           |             |          | 59.00           |
| Comcast<br>PO Box 3002<br>Southeastern, PA 19398-3002   |                 | J           |   |           | x           |          | 479.00          |
| Account No.   | $\vdash$        |             | Claim was incurred for collection account.  |           |             |          | 178.00          |
| Credit Management Control   |                 | J           |   |           | x           |          |                 |
|   |                 |             |   |           |             |          | 662.00          |
| Sheet no. <b>2</b> of <b>10</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |                 |             | (Total of t   | Sub       |             |          | 2,175.00        |

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| In re | Steven W Topor,  | Case No. |
|-------|------------------|----------|
|       | Kristine L Topor |          |

| OPEDITODIS NAME   | С               | Hu          | sband, Wife, Joint, or Community  | С         | U            | D        |                 |
|---|-----------------|-------------|---|-----------|--------------|----------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)               | C O D E B T O R | C<br>A<br>M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGEN | NL - QU - DA | DISPUTED | AMOUNT OF CLAIM |
| Account No.   |                 |             | Claim was incurred for collection account.  | Т         | E            |          |                 |
| Disney Movie Club<br>% North Shore Agency, Inc.<br>270 Spagnoli Road<br>Melville, NY 11747                      |                 | J           |   |           | x            |          | 61.00           |
| Account No.   | 1               |             | Claim was incurred for collection account.  |           |              |          |                 |
| Diversified Services Inc.   |                 | J           |   |           | x            |          |                 |
|   |                 |             |   |           |              |          | 1,762.00        |
| Account No.   |                 |             | Claim was incurred for collection account.  |           |              |          |                 |
| Edward Hospita  |                 | J           |   |           | x            |          |                 |
| Account No.   | -               |             | Claim was incurred for collection account.  |           |              |          | 449.00          |
| Family Medical Ctr of Bolingbrook   |                 | J           |   |           | x            |          |                 |
|   |                 |             |   |           |              |          | 200.00          |
| Account No.   | -               |             | Claim was incurred for services.  |           |              |          |                 |
| Family Medicine Center<br>PO Box 7001<br>Bolingbrook, IL 60440  |                 | J           |   |           | x            |          |                 |
|   |                 |             |   |           |              |          | 2,357.00        |
| Sheet no. <b>_3</b> of <b>_10</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |                 |             | I<br>S<br>(Total of t   | Subt      |              |          | 4,829.00        |

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| In re | Steven W Topor,  | Case No. |
|-------|------------------|----------|
| _     | Kristine L Topor |          |

|   |              |             |  |            | _          |       |     |                 |
|---|--------------|-------------|--|------------|------------|-------|-----|-----------------|
| CREDITOR'S NAME,  | C            | Нι          | sband, Wife, Joint, or Community           | Ç          | U          | Ŀ     | эΤ  |                 |
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)                                      | OD E B T O R | C<br>J<br>H | IS SUBJECT TO SETOFF, SO STATE.            | CONTINGENT | UNLIQUIDAT | - 1 ⊢ | - 1 | AMOUNT OF CLAIM |
| Account No. <b>60046602</b>   | 1            |             | Claim was incurred for collection account. |            | Ė          |       |     |                 |
| Fashion Bug<br>PO Box 47599<br>San Antonio, TX 78265  |              | J           |  |            | x          | t     |     | 481.00          |
| Account No.   |              | T           | Claim was incurred for collection account. |            |            | T     | T   |                 |
| Fingerhut Axsys National Bank<br>PO Box 2900<br>Saint Cloud, MN 56395   |              | J           |  |            | x          |       |     | 297.00          |
| Account No. <b>46100744</b>   | T            | t           | Claim was incurred for collection account. |            |            | t     | †   |                 |
| First Premier Bank<br>PO Box 5147<br>Sioux Falls, SD 57117-5147   |              | J           |  |            | x          |       |     | 360.00          |
| Account No. 48695570  |              | T           | Claim was incurred for collection account. |            |            | T     | †   |                 |
| First Premier Bank P. O. Box 5147 Sioux Falls, SD 57117   |              | J           |  |            | x          |       |     | 166.00          |
| Account No.   | T            | T           | Claim was incurred for collection account. |            |            | T     | †   |                 |
| Hometown Restoration Inc.<br>% Credit Management Services<br>1375 E. Woodfield Rd.; Suite 110<br>Schaumburg, IL 60173 |              | J           |  |            | x          |       |     | 905.00          |
| Sheet no4 of _10_ sheets attached to Schedule of  |              |             | 2  | Subt       | ota        | ıl    | 7   | 2 200 00        |
| Creditors Holding Unsecured Nonpriority Claims  |              |             | (Total of t                                | his        | pag        | ze)   | ) [ | 2,209.00        |

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| In re | Steven W Topor,  | Case No. |
|-------|------------------|----------|
|       | Kristine L Topor |          |

|   |                 |          |   | _          | _   | _        |                 |
|---|-----------------|----------|---|------------|-----|----------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)               | C O D E B T O R | H W      | CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | COZH-ZGEZH | QU  | ΙF       | AMOUNT OF CLAIM |
| Account No. 5406-3300-0051-4877   |                 |          | Claim was incurred for collection account.                        |            | ED  |          |                 |
| HSBC Bank<br>PO Box 5253<br>Carol Stream, IL 60197  |                 | J        |   |            | X   |          | 800.00          |
| Account No. 7001191108324089  | T               | t        | Claim was incurred for collection account.                        |            | Г   |          |                 |
| HSBC Best Buy<br>PO Box 17602<br>Baltimore, MD 21297  |                 | J        |   |            | X   |          | 820.00          |
| Account No.   | t               |          | Claim was incurred for collection account.                        | T          |     |          |                 |
| HTR Construction LLC<br>% Credit Management Services<br>1375 E. Woodfield Rd., Ste. 110<br>Schaumburg, IL 60173 |                 | J        |   |            | X   |          | 907.00          |
| Account No. 5SC5479   |                 |          | Claim is for civil judgment.                                      |            |     |          |                 |
| JRS I Inc   |                 | J        |   |            | X   |          | 2,701.00        |
| Account No.   | ╁               | $\vdash$ | Claim was incurred for collection account.                        | $\vdash$   |     | $\vdash$ | , , ,           |
| K-Mart<br>PO Box 98610<br>Louisville, KY 40298  | -               | J        |   |            | X   |          | 347.00          |
| Sheet no. 5 of 10 sheets attached to Schedule of  |                 | _        |   | Subt       | ota | 1        | F FRF 00        |
| Creditors Holding Unsecured Nonpriority Claims  |                 |          | (Total of t   | his 1      | pag | ge)      | 5,575.00        |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | Steven W Topor,  | Case No. |
|-------|------------------|----------|
|       | Kristine L Topor |          |

| CREDITOR'S NAME,  | C        | Hu          | usband, Wife, Joint, or Community                    | Ç              | Ü                | ו   | 2           |                 |
|---|----------|-------------|--|----------------|------------------|-----|-------------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER                  | CODEBTOR | H<br>W<br>J | CONSIDERATION FOR CLAIM. IF CLAIM                    | CONTIN         | UNLLQU.          | F   | S<br>P<br>U | AMOUNT OF CLAIM |
| (See instructions above.)   | O<br>R   | c           | IS SUBJECT TO SETOFF, SO STATE.                      | N G E N T      | I<br>D<br>A<br>T |     |             | AWOUNT OF CLAIM |
| Account No.   |          |             | Claim was incurred for services.                     | ] <del>`</del> | T<br>E<br>D      |     | Ī           |                 |
| La Grange Memorial Hospital<br>P O Box 9247<br>Oak Brook, IL 60522-9247 |          | J           |  |                | X                | t   |             |                 |
|   |          |             |  |                |                  |     |             | 151.00          |
| Account No.   |          |             | Claim was incurred for services.                     |                |                  | T   | 7           |                 |
| La Grange Women's Clinic SC<br>5201 S. Willow Springs<br>Suite 490      |          | J           |  |                | x                | ,   |             |                 |
| La Grange, IL 60525-2689  |          |             |  |                |                  |     |             | 490.00          |
| Account No.   | T        |             | Claim was incurred for collection account for Sears. |                |                  | T   | 7           |                 |
| LVNV Funding  |          | J           | Sears.   |                | x                | ,   |             |                 |
|   |          | ľ           |  |                | ^                |     |             |                 |
|   |          |             |  |                |                  |     |             | 2,020.00        |
| Account No.   |          |             | Claim was incurred for collection account.           |                |                  | T   | 7           |                 |
| MCI Communications  |          | ١.          |  |                | \<br>\<br>V      |     |             |                 |
|   |          | J           |  |                | X                |     |             |                 |
|   |          |             |  |                |                  |     |             | 263.00          |
| Account No.   |          |             | Claim was incurred for collection account.           |                | Ī                | Ť   | 7           |                 |
| Med Emergency Healthcare  |          |             |  |                |                  |     |             |                 |
|   |          | J           |  |                | X                |     |             |                 |
|   |          |             |  |                |                  |     |             | 218.00          |
| Sheet no6 of _10_ sheets attached to Schedule of                        |          | •           |  | Sub            | iota             | al  | 7           | 3,142.00        |
| Creditors Holding Unsecured Nonpriority Claims                          |          |             | (Total of t  | his            | nas              | ge` | ) L         | 3,142.00        |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | Steven W Topor,  | Case No. |
|-------|------------------|----------|
|       | Kristine L Topor |          |

| CREDITOR'S NAME,  | Ç               | Hu          | sband, Wife, Joint, or Community  | C   | U              | D       |                 |
|---|-----------------|-------------|---|-----|----------------|---------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  Account No.   | C O D E B T O R | C<br>A<br>M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  Claim was incurred for collection account. | N   | L I QU I D A T | ISPUTED | AMOUNT OF CLAIM |
| Account No.   | -               |             | Claim was incurred for conection account.   |     | E              |         |                 |
| Merchants Credit Guide<br>223 W. Jackson Blvd.<br>Suite 900<br>Chicago, IL 60606-6908           |                 | J           |   |     | х              |         | 449.00          |
| Account No. 1471212278/14-71-21-20006   |                 | t           | Claim was incurred for collection account.  | +   |                |         |                 |
| Nicor Gas<br>PO Box 2020<br>Aurora, IL 60507  |                 | J           |   |     | x              |         |                 |
| Account No.   | ╁               |             | Claim was incurred for collection account.  |     |                |         | 1,156.00        |
| Northwest Collectors<br>3601 Algonquin Rd.<br>Suite 500<br>Rolling Meadows, IL 60008-3126       |                 | J           |   |     | x              |         | 415.00          |
| Account No.   | +               |             | Claim was incurred for collection account.  |     |                | H       |                 |
| Pinnacle Credit Services  |                 | J           |   |     | x              |         |                 |
| Account No.   | ╁               |             | Claim was incurred for collection account.  |     |                |         | 768.00          |
| Portfolio Recovery<br>PO Box 12914<br>Norfolk, VA 23541   |                 | J           |   |     | x              |         |                 |
|   |                 |             |   |     |                |         | 71.00           |
| Sheet no7 of _10_ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | f               |             | (Total of   | Sub |                |         | 2,859.00        |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | Steven W Topor,  | Case No. |
|-------|------------------|----------|
|       | Kristine L Topor |          |

| CDEDITODIC NAME   | С        | Hu          | sband, Wife, Joint, or Community  | С         | U           | D             |                 |
|---|----------|-------------|---|-----------|-------------|---------------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)             | CODEBTOR | C<br>J<br>H | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. | CONTINGEN | NL QU L DAT | I S P U T E D | AMOUNT OF CLAIM |
| Account No.   |          |             | Claim was incurred for collection account.  | T         | E<br>D      |               |                 |
| Provena St. Joseph Medical Center<br>333 N. Madison St.<br>Joliet, IL 60435-6595                              |          | J           |   |           | x           |               | 1,508.00        |
| Account No. 4465-6725-0041-2925   |          |             | Claim was incurred for collection account.  |           |             |               | 1,300.00        |
| Providian<br>PO Box 9016<br>Pleasanton, CA 94556  |          | J           |   |           | x           |               | 0.040.00        |
| Account No. <b>25004129</b>   | _        |             | Claim was incurred for collection account.  |           |             |               | 2,243.00        |
| Providian<br>PO Box 9016<br>Pleasanton, CA 94556  |          | J           |   |           | x           |               | 619.00          |
| Account No.   | <u> </u> |             | Claim was incurred for collection account.  |           |             |               |                 |
| Quest Diagnostics<br>% AMCA<br>PO bxo 1235<br>Elmsford, NY 10523-0935   |          | J           |   |           | x           |               | 55.00           |
| Account No. <b>33519511</b>   |          |             | Claim was incurred for collection account.  |           |             |               | 55.00           |
| RNB-Field's 3<br>PO Box 59231<br>Minneapolis, MN 55459  |          | J           |   |           | x           |               |                 |
|   |          |             |   |           |             |               | 200.00          |
| Sheet no. <b>8</b> of <b>10</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |             | (Total of t   | Subt      |             |               | 4,625.00        |

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| In re | Steven W Topor,  | Case No |
|-------|------------------|---------|
|       | Kristine L Topor |         |

|  |          | _        |  |               |              |          |                 |
|--|----------|----------|--|---------------|--------------|----------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  Account No. | CODEBTOR | H W J C  |  |               | DZ1-GD-D4FED |          | AMOUNT OF CLAIM |
|  | ł        |          |  |               | D            |          |                 |
| Romeoville Fire Department   |          | J        |  |               | х            |          | 415.00          |
| Account No.  | t        |          | Claim was incurred for services.           |               | Г            |          |                 |
| Souma Diagnostics<br>PO Box 11690<br>Chicago, IL 60611-1690  |          | J        |  |               | x            |          |                 |
|  |          |          |  |               |              |          | 179.00          |
| Account No.  Surgical Referral Service   |          | J        | Claim was incurred for collection account. |               | х            |          |                 |
|  |          |          |  |               |              |          | 1,762.00        |
| Account No.  |          |          | Claim was incurred for collection account. |               |              |          |                 |
| T Mobile   |          | J        |  |               | х            |          |                 |
|  |          |          |  |               |              |          | 662.00          |
| Account No. 15050214198  |          | T        | Claim was incurred for collection account. | Ħ             | Γ            |          |                 |
| World Credit Investors LLC   |          | J        |  |               | х            |          | 1,533.00        |
| Shoot no O of 40 shoots attached to Sale-July of   |          | <u>L</u> |  |               | 045          | <u>L</u> | .,555.66        |
| Sheet no. <b>9</b> of <b>10</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims  |          |          | (Total of t                                | Subt<br>his 1 |              |          | 4,551.00        |

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 $B6F\ (Official\ Form\ 6F)\ (12/07)$  - Cont.

| In re | Steven W Topor,  | Case No. |
|-------|------------------|----------|
|       | Kristine L Topor |          |

|   |          |    |   |            | _        | _   |                 |
|---|----------|----|---|------------|----------|-----|-----------------|
| CREDITOR'S NAME,  | CODEBTOR | Hu | sband, Wife, Joint, or Community                                  | C          | DNLLQDLL | P   |                 |
| MAILING ADDRESS   | Ď        | н  | DATE OF A BANKA C BIOLIDDED AND                                   | Ň          | Į į.     | s   |                 |
| INCLUDING ZIP CODE,   | E<br>  B | W  | DATE CLAIM WAS INCURRED AND                                       | H          | l o      | l l |                 |
| AND ACCOUNT NUMBER  | Ţ        | J  | CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | Ņ          | ũ        | Ť   | AMOUNT OF CLAIM |
| (See instructions above.)                                       | l R      | С  | is subject to seture, so state.                                   | G<br>F     | Ι'n      | ΙĖ  |                 |
|   | <u> </u> | ┡  |   | CONFINGENT | I DATED  |     |                 |
| Account No.   |          |    | Claim was incurred for collection account.                        | l '        | Ė        |     |                 |
|   |          |    |   |            | D        |     |                 |
| World Credit Investors LLC                                      |          |    |   |            |          |     |                 |
|   |          | J  |   |            | X        |     |                 |
|   |          |    |   |            |          |     |                 |
|   |          |    |   |            |          |     |                 |
|   |          |    |   |            |          |     |                 |
|   |          |    |   |            |          |     | 1,533.00        |
|   | ┢        | ⊢  |   | $\vdash$   | H        | ⊢   |                 |
| Account No.   |          |    |   |            |          |     |                 |
|   |          |    |   |            |          |     |                 |
|   |          |    |   |            |          |     |                 |
|   |          |    |   |            |          |     |                 |
|   |          |    |   |            |          |     |                 |
|   |          |    |   |            |          |     |                 |
|   |          |    |   |            |          |     |                 |
|   |          |    |   |            |          |     |                 |
|   | ┢        | ┝  |   | H          | H        | H   |                 |
| Account No.   |          |    |   |            |          |     |                 |
|   |          |    |   |            |          |     |                 |
|   |          |    |   |            |          |     |                 |
|   |          |    |   |            |          |     |                 |
|   |          |    |   |            |          |     |                 |
|   |          |    |   |            |          |     |                 |
|   |          |    |   |            |          |     |                 |
|   |          |    |   |            |          |     |                 |
| A AN  | ╁        | ╁  |   | $\vdash$   |          |     |                 |
| Account No.   | ı        |    |   |            |          |     |                 |
|   |          |    |   |            |          |     |                 |
|   |          |    |   |            |          |     |                 |
|   |          |    |   |            |          |     |                 |
|   |          |    |   |            |          |     |                 |
|   |          |    |   |            |          |     |                 |
|   |          |    |   |            |          |     |                 |
|   |          |    |   |            |          |     |                 |
| Account No.   |          | T  |   | T          |          |     |                 |
| recount ivo.  | ł        |    |   |            |          |     |                 |
|   |          |    |   |            |          |     |                 |
|   |          |    |   |            |          |     |                 |
|   |          |    |   |            |          |     |                 |
|   |          |    |   |            |          |     |                 |
|   |          |    |   |            |          |     |                 |
|   |          |    |   |            |          |     |                 |
|   | L        | L  |   | L          | L        | L   |                 |
| Sheet no. <b>10</b> of <b>10</b> sheets attached to Schedule of |          |    |   | ubt        | ota      | 1   |                 |
|   |          |    | (Total of the   |            |          |     | 1,533.00        |
| Creditors Holding Unsecured Nonpriority Claims                  |          |    | (1otal of t   | ms ]       | pag      | (e) |                 |
|   |          |    |   | T          | ota      | 1   |                 |
|   |          |    | (Report on Summary of Sc  |            |          |     | 36,485.00       |
|   |          |    | (Keport on Summary of Sc  | ncu        | uic      | 3)  |                 |

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B6G (Official Form 6G) (12/07)

| In re | Steven W Topor,  | Case No. |
|-------|------------------|----------|
|       | Kristine L Topor |          |

Debtors

### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 08-06092 Doc 1 Filed 03/14/08 Entered 03/14/08 11:44:47 Desc Main Document Page 37 of 50

B6H (Official Form 6H) (12/07)

| In re | Steven W Topor,  | Case No |
|-------|------------------|---------|
|       | Kristine L Topor |         |

Debtors

### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

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**B6I (Official Form 6I) (12/07)** 

|       | Steven W Topor   |           |          |  |
|-------|------------------|-----------|----------|--|
| In re | Kristine L Topor |           | Case No. |  |
|       |                  | Debtor(s) |          |  |

### SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

| Debtor's Marital Status:  | DEPENDENTS OF DEBTOR AND SPOUSE                       |                 |          |            |          |  |
|---|---|-----------------|----------|------------|----------|--|
| Married   | RELATIONSHIP(S):  Daughter                            | AGE(S):         | ⁄ear     |            |          |  |
| <b>Employment:</b>  | DEBTOR  | 1               | SPOUSE   |            |          |  |
|   | Driver  | Packer          |          |            |          |  |
| Name of Employer  | Brakur Custom Cabinetry                               | D&H Distribu    | ting     |            |          |  |
|   | 6 Years   | 07/03/07        |          |            |          |  |
| Address of Employer   |   |                 |          |            |          |  |
|   | Shorewood, IL   | Bolingbrook,    |          |            |          |  |
|   | projected monthly income at time case filed)          |                 | DEBTOR   |            | SPOUSE   |  |
|   | commissions (Prorate if not paid monthly)             | \$ _            | 3,268.00 | \$         | 1,883.00 |  |
| 2. Estimate monthly overtime  |   | \$ _            | 0.00     | \$         | 0.00     |  |
| 3. SUBTOTAL   |   | \$_             | 3,268.00 | \$_        | 1,883.00 |  |
| 4. LESS PAYROLL DEDUCTIONS  | S   |                 |          |            |          |  |
| a. Payroll taxes and social secu  | urity   | \$              | 821.00   | \$         | 280.00   |  |
| b. Insurance  |   | \$              | 0.00     | \$         | 194.00   |  |
| c. Union dues   |   | \$              | 44.00    | \$         | 0.00     |  |
| d. Other (Specify):   |   | \$ _            | 0.00     | \$         | 0.00     |  |
|   |   | \$              | 0.00     | \$         | 0.00     |  |
| 5. SUBTOTAL OF PAYROLL DEI  | DUCTIONS  | \$_             | 865.00   | \$_        | 474.00   |  |
| 6. TOTAL NET MONTHLY TAKE   | HOME PAY  | \$_             | 2,403.00 | <b>\$</b>  | 1,409.00 |  |
| 7. Regular income from operation of   | f business or profession or farm (Attach detailed sta | tement) \$      | 0.00     | \$         | 0.00     |  |
| 8. Income from real property  |   | \$              | 0.00     | \$         | 0.00     |  |
| 9. Interest and dividends   |   | \$ _            | 0.00     | \$         | 0.00     |  |
| dependents listed above   | rt payments payable to the debtor for the debtor's us | e or that of \$ | 0.00     | \$         | 0.00     |  |
| 11. Social security or government as (Specify):                                     |   | •               | 0.00     | •          | 0.00     |  |
| (Specify):  |   |                 | 0.00     | \$ <u></u> | 0.00     |  |
| 12 Dansian or ratingment in some  |   |                 | 0.00     | φ_         | 0.00     |  |
| <ul><li>12. Pension or retirement income</li><li>13. Other monthly income</li></ul> |   | <b>ф</b> _      | 0.00     | Ф          | 0.00     |  |
| (0 :0)  |   | •               | 0.00     | \$         | 0.00     |  |
| (Specify).  |   |                 | 0.00     | \$ <u></u> | 0.00     |  |
|   |   | <u> </u>        | 0.00     | Φ_         | 0.00     |  |
| 14. SUBTOTAL OF LINES 7 THR   | OUGH 13   | \$_             | 0.00     | \$_        | 0.00     |  |
| 15. AVERAGE MONTHLY INCOM   | ME (Add amounts shown on lines 6 and 14)              | \$_             | 2,403.00 | \$         | 1,409.00 |  |
| 16. COMBINED AVERAGE MON  | THLY INCOME: (Combine column totals from line         | e 15)           | \$       | 3,812      | .00      |  |

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

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B6J (Official Form 6J) (12/07)

|       | Steven W Topor   |           |          |  |
|-------|------------------|-----------|----------|--|
| In re | Kristine L Topor |           | Case No. |  |
|       |                  | Debtor(s) | <u> </u> |  |

### SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case

| filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22.                    | The average    |               |
|---|----------------|---------------|
| ☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complexpenditures labeled "Spouse."   | ete a separate | e schedule of |
| 1. Rent or home mortgage payment (include lot rented for mobile home)   | \$             | 707.00        |
| a. Are real estate taxes included? Yes X No   |                |               |
| b. Is property insurance included? Yes X No No  |                |               |
| 2. Utilities: a. Electricity and heating fuel   | \$             | 280.00        |
| b. Water and sewer  | \$             | 45.00         |
| c. Telephone  | \$             | 85.00         |
| d. Other Cable  | \$             | 90.00         |
| 3. Home maintenance (repairs and upkeep)  | \$             | 0.00          |
| 4. Food   | \$             | 500.00        |
| 5. Clothing   | \$             | 80.00         |
| 6. Laundry and dry cleaning   | \$             | 0.00          |
| 7. Medical and dental expenses  | \$             | 0.00          |
| 8. Transportation (not including car payments)  | \$             | 420.00        |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc.   | \$             | 0.00          |
| 10. Charitable contributions  | \$             | 0.00          |
| 11. Insurance (not deducted from wages or included in home mortgage payments)   |                |               |
| a. Homeowner's or renter's  | \$             | 0.00          |
| b. Life   | \$             | 0.00          |
| c. Health   | \$             | 0.00          |
| d. Auto   | \$             | 189.00        |
| e. Other  | \$             | 0.00          |
| 12. Taxes (not deducted from wages or included in home mortgage payments)   |                |               |
| (Specify)   | \$             | 0.00          |
| 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)  | ' <u></u>      |               |
| a. Auto   | \$             | 568.00        |
| b. Other 2006 Yamaha  | \$             | 189.00        |
| c. Other  | \$             | 0.00          |
| 14. Alimony, maintenance, and support paid to others  | \$             | 0.00          |
| 15. Payments for support of additional dependents not living at your home   | \$             | 0.00          |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement)  | \$             | 0.00          |
| 17. Other Day Care  | \$             | 650.00        |
| Other   | \$             | 0.00          |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and,  | \$             | 3,803.00      |
| if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)  19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document: |                |               |
| 20. STATEMENT OF MONTHLY NET INCOME   | _              | _             |
| a. Average monthly income from Line 15 of Schedule I  | \$             | 3,812.00      |
| b. Average monthly expenses from Line 18 above  | \$             | 3,803.00      |
| c. Monthly net income (a. minus b.)   | \$             | 9.00          |

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B6 Declaration (Official Form 6 - Declaration). (12/07)

# **United States Bankruptcy Court Northern District of Illinois**

| In re | Steven W Topor<br>Kristine L Topor |           |         |   |
|-------|------------------------------------|-----------|---------|---|
|       |                                    | Debtor(s) | Chapter | 7 |
|       |                                    |           | _       |   |
|       |                                    |           |         |   |
|       |                                    |           |         |   |

### DECLARATION CONCERNING DEBTOR'S SCHEDULES

### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

|      | 1 1 1 1        |           | ad the foregoing summary and schedules, consisting of est of my knowledge, information, and belief. |
|------|----------------|-----------|---|
| Date | March 13, 2008 | Signature | /s/ Steven W Topor Steven W Topor Debtor  |
| Date | March 13, 2008 | Signature | /s/ Kristine L Topor Kristine L Topor Joint Debtor  |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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United States Bankruptcy Court
Northern District of Illinois

| In re  | Steven W Topor<br>Kristine L Topor   |   | Case No.   |   |
|--------|--|---|--|---|
| 111 10 | Misune L Topol   | Debtor(s)   | Case No. Chapter   | 7   |
|        | DISCLOSURE OF COMPENSA   | ATION OF ATTO   | RNEY FOR DE  | EBTOR(S)  |
|        | Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 20 compensation paid to me within one year before the filing of the rendered on behalf of the debtor(s) in contemplation of or  | 016(b), I certify that I a  | am the attorney for<br>cy, or agreed to be pai   | the above-named debtor and that<br>d to me, for services rendered or to   |
|        | For legal services, I have agreed to accept  |   | \$   | 400.00  |
|        | Prior to the filing of this statement I have received  |   | \$   | 400.00  |
|        | Balance Due  |   | \$   | 0.00  |
| 2.     | The source of the compensation paid to me was:   |   |  |   |
|        | ■ Debtor □ Other (specify):  |   |  |   |
| 3.     | The source of compensation to be paid to me is:  |   |  |   |
|        | ■ Debtor □ Other (specify):  |   |  |   |
| 4.     | ■ I have not agreed to share the above-disclosed compensa  | tion with any other persor  | unless they are mem  | bers and associates of my law firm.                                       |
|        | ☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names of  |   |  |   |
|        | In return for the above-disclosed fee, I have agreed to render a. Analysis of the debtor's financial situation, and rendering b. Preparation and filing of any petition, schedules, statemer c. Representation of the debtor at the meeting of creditors at d. [Other provisions as needed]  Negotiations with secured creditors to redu reaffirmation agreements and applications a 522(f)(2)(A) for avoidance of liens on housel | advice to the debtor in de<br>nt of affairs and plan whic<br>nd confirmation hearing, a<br>ce to market value; ex<br>as needed; preparation | termining whether to<br>h may be required;<br>and any adjourned hea<br>temption planning | file a petition in bankruptcy; rings thereof; ; preparation and filing of |
| 5.     | By agreement with the debtor(s), the above-disclosed fee doe Representation of the debtors in any discha any other adversary proceeding.   |   |  | es, relief from stay actions or   |
|        | C  | ERTIFICATION  |  |   |
|        | I certify that the foregoing is a complete statement of any agroankruptcy proceeding.  | eement or arrangement for   | r payment to me for re   | epresentation of the debtor(s) in   |
| Date   | d: March 13, 2008  | /s/ Stephen J. W  | est, Atty.   |   |
|        |  | Stephen J. West<br>Stephen J. West<br>628 Columbus D<br>Rm. 102<br>Ottawa, IL 61350   | )r.  |   |

815-434-7250 Fax: 815-434-0951

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Form 8 (10/05)

### **United States Bankruptcy Court** Northern District of Illinois

| In re                | Steven W Topor<br>Kristine L Topor   |                             |   | Case No.                            |   |  |
|----------------------|--|-----------------------------|---|-------------------------------------|---|--|
|                      |  |                             | Debtor(s)   | Chapter                             | 7   |  |
|                      | CHAPTER 7 INDI   | VIDUAL DEBT(                | OR'S STATEME  | NT OF IN                            | <b>TENTION</b>  |  |
| ■ I                  | have filed a schedule of assets and liabil                                     | ities which includes deb    | ts secured by property o                                  | f the estate.                       |   |  |
| ] I                  | have filed a schedule of executory contra                                      | acts and unexpired leases   | s which includes person                                   | al property subj                    | ect to an unexpire                                    | ed lease.  |
| I                    | intend to do the following with respect to                                     | o property of the estate v  | which secures those deb                                   | ts or is subject t                  | o a lease:  |  |
| Descript             | ion of Secured Property  | Creditor's Name             | Property will be<br>Surrendered                           | Property<br>is claimed<br>as exempt | Property will be redeemed pursuant to 11 U.S.C. § 722 | Debt will be reaffirmed pursuant to 11 U.S.C. § 524(c) |
| Securi<br>obtain     | ty is a 2006 Yamaha motorcycle<br>ed in 2007 as purchase money<br>ty interest. | G.E. Money Bank             |   |                                     |   | X  |
|                      | ty is a 2005 Chevrolet obtained in s purchase money security st.               | HSBC Auto Finance           | е   |                                     |   | Х  |
|                      | ty is a mortgage on petitioners obtained in 2001.                              | P.H.H. Mortgage<br>Services |   |                                     |   | Х  |
| Descript<br>Property | ion of Leased  | Lessor's Name               | Lease will be assumed pursuan to 11 U.S.C. § 362(h)(1)(A) | t                                   |   |  |
| -NONE                |  | Design of Family            | 002(11)(11)   |                                     |   |  |
| Date _               | March 13, 2008   | Signature                   | /s/ Steven W Topor<br>Steven W Topor<br>Debtor            |                                     |   |  |
| Date _               | March 13, 2008   | Signature                   | /s/ Kristine L Topor Kristine L Topor                     |                                     |   |  |

Joint Debtor

### **United States Bankruptcy Court** Northern District of Illinois

|       | Steven W Topor                            |  | C. N                             |           |
|-------|---|--|----------------------------------|-----------|
| In re | Kristine L Topor                          | Debtor(s)                                  | Case No. Chapter 7               |           |
|       |   |  |                                  |           |
|       | V   | ERIFICATION OF CREDITOR M                  | ATRIX                            |           |
|       |   | Number of                                  | Creditors:                       | 53        |
|       | The above-named Debtor(s (our) knowledge. | s) hereby verifies that the list of credit | ors is true and correct to the b | est of my |
| Date: | March 13, 2008                            | /s/ Steven W Topor                         |                                  |           |
|       |   | Steven W Topor Signature of Debtor         |                                  |           |
| Date: | March 13, 2008                            | /s/ Kristine L Topor                       |                                  |           |
|       |   | Kristine L Topor Signature of Debtor       |                                  |           |

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

# NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

### Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

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#### B 201 (04/09/06)

#### Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

#### **Certificate of Attorney**

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

| Stephen J. West, Atty. 02989794                               | X /s/ Stephen J. West, Atty.               | March 13, 2008 |
|---|--|----------------|
| Printed Name of Attorney                                      | Signature of Attorney                      | Date           |
| Address:  |  |                |
| 628 Columbus Dr.  |  |                |
| Rm. 102   |  |                |
| Ottawa, IL 61350  |  |                |
| 815-434-7250  |  |                |
| Cert: I (We), the debtor(s), affirm that I (we) have received | ificate of Debtor ed and read this notice. |                |
| Steven W Topor  |  |                |
| Kristine L Topor  | X /s/ Steven W Topor                       | March 13, 2008 |
| Printed Name of Debtor  | Signature of Debtor                        | Date           |
| Case No. (if known)   | X /s/ Kristine L Topor                     | March 13, 2008 |
|   | Signature of Joint Debtor (if any)         | Date           |

Adventist Hinsdale Hospital PO Box 9247 Oak Brook, IL 60522

Adventist Hinsdale Hospital PO Box 9247 Oak Brook, IL 60522

Ameritech Consumer P O Box 6170 Carol Stream, IL 60197

Anesthesia Associates 350 S. Northwest Hwy. Park Ridge, IL 60068-4216

Arrow Financial Services 2450 W. Peterson Chicago, IL 60659

Aspire
Payment Processing
PO Box 23007
Columbus, GA 31902-3007

AT&T Telephone % Plaza Associates PO Box 18008 Hauppauge, NY 11788-8808

Capital One Bank PO Box 790216 Saint Louis, MO 63179

Chase % Encore Receivable Mgmt. Inc. PO Box 3330 Olathe, KS 66063-3330

Chase/Circuit City PO Box 52095 Phoenix, AZ 85072

Circuit City

Collection Company of America PO Box 608 Tinley Park, IL 60477

Comcast PO Box 3002 Southeastern, PA 19398-3002

Credit Management Control

Disney Movie Club % North Shore Agency, Inc. 270 Spagnoli Road Melville, NY 11747

Diversified Services Inc.

Edward Hospita

Family Medical Ctr of Bolingbrook

Family Medicine Center PO Box 7001 Bolingbrook, IL 60440

Fashion Bug PO Box 47599 San Antonio, TX 78265

Fingerhut Axsys National Bank PO Box 2900 Saint Cloud, MN 56395

First Premier Bank PO Box 5147 Sioux Falls, SD 57117-5147

First Premier Bank P. O. Box 5147 Sioux Falls, SD 57117 G.E. Money Bank

Hometown Restoration Inc. % Credit Management Services 1375 E. Woodfield Rd.; Suite 110 Schaumburg, IL 60173

HSBC Auto Finance 6602 Convoy Court San Diego, CA 92111

HSBC Bank PO Box 5253 Carol Stream, IL 60197

HSBC Best Buy PO Box 17602 Baltimore, MD 21297

HTR Construction LLC % Credit Management Services 1375 E. Woodfield Rd., Ste. 110 Schaumburg, IL 60173

JRS I Inc

K-Mart PO Box 98610 Louisville, KY 40298

La Grange Memorial Hospital P O Box 9247 Oak Brook, IL 60522-9247

La Grange Women's Clinic SC 5201 S. Willow Springs Suite 490
La Grange, IL 60525-2689

LVNV Funding

MCI Communications

Med Emergency Healthcare

Merchants Credit Guide 223 W. Jackson Blvd. Suite 900 Chicago, IL 60606-6908

Nicor Gas PO Box 2020 Aurora, IL 60507

Northwest Collectors 3601 Algonquin Rd. Suite 500 Rolling Meadows, IL 60008-3126

P.H.H. Mortgage Services 4001 Leadenhall Rd. Mount Laurel, NJ 08054

Pinnacle Credit Services

Portfolio Recovery PO Box 12914 Norfolk, VA 23541

Provena St. Joseph Medical Center 333 N. Madison St. Joliet, IL 60435-6595

Providian PO Box 9016 Pleasanton, CA 94556

Providian PO Box 9016 Pleasanton, CA 94556 Quest Diagnostics % AMCA PO bxo 1235 Elmsford, NY 10523-0935

RNB-Field's 3 PO Box 59231 Minneapolis, MN 55459

Romeoville Fire Department

Souma Diagnostics PO Box 11690 Chicago, IL 60611-1690

Surgical Referral Service

T Mobile

World Credit Investors LLC

World Credit Investors LLC